

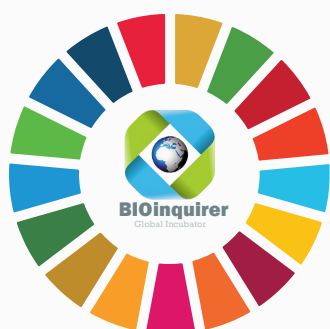


BIO INQUIRER

Event 10

19th November 2016

CALL FOR ABSTRACTS



**Promoting Well-being through
SUSTAINABLE DEVELOPMENT GOALS**

Academic Sessions of IIHS 2016

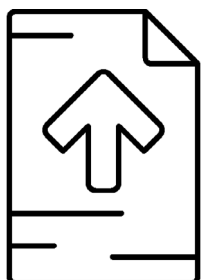
IIHS
Scientific Committee



IIHS
INTERNATIONAL INSTITUTE
OF HEALTH SCIENCES
"Opportunities Unlimited"

ABOUT

The Annual Academic Sessions of the International Institute of Health Sciences (IIHS), Sri Lanka will be held on the **19th November 2016** as the 10th Event under the BioInquirer Academic Portal of the IIHS. This will be the 5th Research Forum organized by the IIHS on Health Care Research. This year the forum will be under the theme **"Promoting wellbeing through Sustainable Development Goals"**. The event will comprise of a Key note address on the theme and three plenary sessions on Evidence based practice, Importance of global collaborations and community empowerment in health development. Further there will be close to 60 opportunities to make oral or poster presentations of undergraduate and postgraduate research and other scholarly work (including case studies, literature reviews, systematic reviews etc.). This forum is themed around the **Sustainable Development Goals (SDGs)**, officially known as **Transforming our world: the 2030 Agenda for Sustainable Development**, Spearheaded by the United Nations. The conference main themes are based on the 17 goals and with 169 targets of the United Nations SDGs. contained in paragraph 54 United Nations Resolution A/RES/70/1 of 25 September 2015.



ABSTRACT SUBMISSION GUIDELINES

Abstract Submission

Abstracts can be submitted under any of the following tracks. Please note that the deadline for abstract submission is **1st of October 2016**.

Forum Tracks:

The Official Agenda for Sustainable Development adopted on 25 September 2015 has 92 paragraphs, with the main paragraph (51) outlining the 17 Sustainable Development Goals and its associated 169 targets. This included the following goals:

1. **Poverty and wellbeing** : Health improvement through elimination of Poverty.
2. **Nutrition and wellbeing** : Food security, food safety and improved nutrition and promotion sustainable agriculture in order to eliminate hunger.
3. **Disease free wellbeing** : Promote health for all at all ages by.
4. **Education and wellbeing** : Health improvement in communities by improving education.
5. **Gender Equality and wellbeing** : Gender inequality effecting health care delivery.
6. **Clean Water and wellbeing** : Availability of water and sanitation for all.
7. **Affordable and Clean Energy and wellbeing** - Affordable, reliable, sustainable and clean energy.
8. **Economic Growth and wellbeing**: Sustained, inclusive and sustainable economic growth that promotes health.
9. **Industry, Innovation, Infrastructure and wellbeing** : Health promotion through industrial innovation and infrastructure.
10. **Wellbeing through Reduced Inequalities** : Promoting health through reducing inequality within countries.
11. **Wellbeing through Sustainable Cities and Communities** : Cities and human settlements that are inclusive, safe, resilient and sustainable.
12. **Wellbeing through Responsible Consumption and Production** : Consumption and production patterns that would threaten wellbeing.
13. **Wellbeing through Climate Action** : Climate issues that could potentially threaten well being.
14. **Life Below Water and Wellbeing** : Fisheries industries and health.
15. **Life on Land and Wellbeing** : Agriculture, farms and health.
16. **Peace and Justice through Wellbeing** : - Peaceful and inclusive societies for sustainable development.
17. **Wellbeing through Partnerships** : Public- private or other types of partnerships that promote health

This Conference is For

1. Doctors
2. Nurses
3. Physiotherapists
4. Laboratory technicians
5. Healthcare administrators/ Medical administrators.
6. Social workers
7. Health care educators
12. Public health workers

What are Abstracts?

Abstracts are brief summaries of the presentations. The abstract should include background and aim of the project, brief description of methods, results and a conclusion. Abstracts essentially answer four questions:

1. What was the problem and the aim of the project?
2. Which methods did the author(s) use to find a solution to the problem?
3. What was discovered as a result of the research or practice?
4. What can be generalized or learned from these results?

Type of Abstracts Encouraged

- Research (Qualitative, Quantitative, Mixed, Action, Experimental etc.)
- Clinical Audits
- Case Studies
- Reflections
- Literature Reviews
- Systematic Reviews
- Projects

(Only Genuine and Novel Work will be accepted)

Typical Abstract Format

- Abstracts should be submitted in soft copy formats.
- Notification of acceptance of the abstracts will be e-mailed by the 15th October 2016.
- An abstract should be a maximum 250 words, excluding title and author details. Further details are as follows;

1. **Font Type:** Times New Roman

2. **Font Size:** Title: 12, Body: 11

3. **Title** should be bolded

4. **Name** should be indicated as surname followed by initials

5. **Abstract** should be divided into following sub topics;

Introduction

Objective

Methods

Results

Conclusions

It is the author's responsibility to submit a correct abstract and subsequent paper.

- Below the name indicate the study program and institute.
- In supervised researches, the supervisor should be indicated.
- Samples are given below.

Sample Abstract of a Research

Back pain associated with various sitting activities among female Advanced level students in a leading girl's school in Colombo.

Galappaththi G.N.D¹

Silva S.N²

1 Diploma student of physiotherapy following at International Institute of Health Sciences – Welisara Sri Lanka

2 (Supervisor) Medical officer; National Hospital of Sri Lanka

Introduction: Lower back pain (LBP) is known to be common among the teenagers and to be associated with prolonged and inappropriate sitting postures related to activities like watching TV. However the seated activity patterns are different among selected groups of teenagers like the Advanced Level (AL) students.

Objective: To identify the prevalence of acute lower back pain and its relationship to various sitting activities among AL students from a leading girl's school in Sri Lanka.

Methods : : A descriptive study was done on 200 Female AL students selected using cluster sampling from a typical girls' school in Colombo using a self-administered questionnaire.

Results: 79 out of 200 students had acute LBP recently. The mean study time on a weekday (in hours) was 5.316 among those with LBP and 3.793 ($p=0.000$) among those without. LBP significantly depended on the number of tuition classes attended ($p = 0.036$). 88% with LBP attended more than 3 classes per week. The mean total time spent in tuition classes was 25.095 hours for those with LBP and 17.190 hours for those without ($p = 0.000$). Time spent before TV and computer (PC) was less among those with higher daily study hours and tuition hours, and TV and PC time did not significantly differ between those with and without LBP.

Conclusions: Even with less time on TV and PC, LBP was still high among those with other prolonged sitting activities like studying and tuition classes.

Key words: Lower Back Pain, Sitting activities, Teenagers, LBP, Posture related back pain

Sample Abstract for Literature Review

Surviving and thriving in academia: a selective bibliography for new faculty members

Galappaththi G.N.D¹

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- *2 (Supervisor) Medical officer; National Hospital of Sri Lanka*

Literature review

Purpose

To provide a selective bibliography for graduate students and new faculty members with sources which can help them develop their academic career.

Design/methodology/approach

A range of recently published (1993-2002) works, which aim to provide practical advice rather than theoretical books on pedagogy or educational administration, are critiqued to aid the individual make the transition into academia. The sources are sorted into sections: finding an academic job, general advice, teaching, research and publishing, tenure and organizations.

Findings

Provides information about each source, indicating what can be found there and how the information can help. Recognises the lack of real training of many academics before they are expected to take on teaching/researching duties and finds some texts which help.

Research limitations/implications

It's not an exhaustive list and apart from one UK book all the rest are US publications which perhaps limits its usefulness elsewhere.

Practical implications

A very useful source of information and impartial advice for graduate students planning to continue in academia or for those who have recently obtained a position in academia.

Originality/value

This paper fulfils an identified information/resources need and offers practical help to an individual starting out on an academic career.

Sample Abstract for Project

The Tamil Nadu Health Systems Project

Galappaththi G.N.D¹

Silva S.N²

- *1 Diploma student of physiotherapy following at International Institute of Health Sciences – Welisara Sri Lanka*
- *2 (Supervisor) Medical officer; National Hospital of Sri Lanka*

The Tamil Nadu Health Systems Project aims to significantly improve the effectiveness of the health system, both public and private through: (1) increased access to and utilization of health services, particularly by poor, disadvantaged and tribal groups; (2) development and pilot testing of effective interventions to address key health challenges, specifically non-communicable diseases; (3) improved health outcomes, access and quality of service delivery through strengthened oversight of the public sector health systems and greater engagement of non-governmental sector); and (4) increased effectiveness of public sector hospital services, primarily at district and sub-district levels. Each of the four components is comprised of several sub-components: Component 1 reduces maternal and neonatal mortality, improves tribal health, and helps the poor and disadvantaged use hospitals. Component 2 focuses on health promotion, implements clinic-based NCD control pilots, and traffic injury prevention and treatment. Component 3 improves monitoring and evaluation, quality of care, strengthens health care waste management, and builds capacity for strategy development and implementation. Component 4 improves secondary care facilities, equipment, human resources planning and development, and enhances management of public facilities

Sample Abstract for Case study/Reflection

Persistent psychogenic déjà vu: a case report

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Introduction

Déjà vu is typically a transient mental state in which a novel experience feels highly familiar. Although extensively studied in relation to temporal lobe epilepsy as part of simple partial seizures, déjà vu has been less studied in other clinical populations. A recent review of temporal lobe epilepsy suggested a possible link between clinical levels of anxiety and debilitating déjà vu, indicating further research is required. Here, for the first time in the literature, we present a case study of a young man with anxiety and depersonalisation who reported experiencing persistent and debilitating déjà vu. This report therefore adds to the limited literature on the relationship between anxiety and déjà vu.

Case Description

A 23-year-old White British man presented with a form of persistent déjà vu in 2010, approximately 3 years since symptom onset. He reported a history of anxiety and experiencing feelings of depersonalisation. Neurological assessment (electroencephalogram and magnetic resonance imaging) did not indicate any abnormalities. We assessed his recognition memory with a task used in patients with dementia who report similar experiences but lack awareness of their falseness.

Discussion

Our case's memory performance was more conservative than controls but did not indicate a memory deficit. Unlike other patients with chronic déjà vu (for example, in dementia), he is fully aware of the false nature of his déjà vu and this presumably leads to his intact recognition memory performance. We suggest that his persistent déjà vu is psychogenic and conclude that déjà vu should be further studied in psychiatric disorders.

CONTACT DETAILS

Please email your abstracts to any of the following email addresses. Along with your Name and contact details.

For information regarding

- The forum
- Travel and Accommodation
- Registration

Please feel free to contact us.

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